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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/075,088	02/16/2002	Graham Lindley Spruiell	IMA-0014-OXYPAK	7112

42416 7590 03/29/2006

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EXAMINER	
MENDOZA, MICHAEL G	

ART UNIT	PAPER NUMBER
3731	

DATE MAILED: 03/29/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

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APPLICATION NO./ CONTROL NO.	FILING DATE	FIRST NAMED INVENTOR / PATENT IN REEXAMINATION	ATTORNEY DOCKET NO.
10/075 088			

EXAMINER	
ART UNIT	PAPER

20060321

DATE MAILED:

Please find below and/or attached an Office communication concerning this application or proceeding.

Commissioner for Patents

Please see the attached interview summary.

Glenn K Dawson
Primary Examiner
Art Unit: 3731

Interview Summary	Application No.	Applicant(s)	
	10/075,088	SPRUIELL, GRAHAM LINDLEY	
	Examiner	Art Unit	
	Glenn K. Dawson	3731	

All participants (applicant, applicant's representative, PTO personnel):

(1) *Glenn K. Dawson*. (3)_____.

(2) *Edward Kelley*. (4)_____.

Date of Interview: *31 March 2005*.

Type: a)☒ Telephonic b)☐ Video Conference
c)☐ Personal [copy given to: 1)☐ applicant 2)☐ applicant's representative]

Exhibit shown or demonstration conducted: d)☐ Yes e)☒ No.
If Yes, brief description: _____.

Claim(s) discussed: *all*.

Identification of prior art discussed: *Zapol-'407*.

Agreement with respect to the claims f)☐ was reached. g)☐ was not reached. h)☒ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: *See Continuation Sheet*.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

GLENN K. DAWSON
PRIMARY EXAMINER

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

_____
Examiner's signature, if required

Summary of Record of Interview Requirements

Manual of Patent Examining Procedure (MPEP), Section 713.04, Substance of Interview Must be Made of Record
A complete written statement as to the substance of any face-to-face, video conference, or telephone interview with regard to an application must be made of record in the application whether or not an agreement with the examiner was reached at the interview.

Title 37 Code of Federal Regulations (CFR) § 1.133 Interviews
Paragraph (b)
In every instance where reconsideration is requested in view of an interview with an examiner, a complete written statement of the reasons presented at the interview as warranting favorable action must be filed by the applicant. An interview does not remove the necessity for reply to Office action as specified in §§ 1.111, 1.135. (35 U.S.C. 132)

37 CFR §1.2 Business to be transacted in writing.
All business with the Patent or Trademark Office should be transacted in writing. The personal attendance of applicants or their attorneys or agents at the Patent and Trademark Office is unnecessary. The action of the Patent and Trademark Office will be based exclusively on the written record in the Office. No attention will be paid to any alleged oral promise, stipulation, or understanding in relation to which there is disagreement or doubt.

The action of the Patent and Trademark Office cannot be based exclusively on the written record in the Office if that record is itself incomplete through the failure to record the substance of interviews.

It is the responsibility of the applicant or the attorney or agent to make the substance of an interview of record in the application file, unless the examiner indicates he or she will do so. It is the examiner's responsibility to see that such a record is made and to correct material inaccuracies which bear directly on the question of patentability.

Examiners must complete an Interview Summary Form for each interview held where a matter of substance has been discussed during the interview by checking the appropriate boxes and filling in the blanks. Discussions regarding only procedural matters, directed solely to restriction requirements for which interview recordation is otherwise provided for in Section 812.01 of the Manual of Patent Examining Procedure, or pointing out typographical errors or unreadable script in Office actions or the like, are excluded from the interview recordation procedures below. Where the substance of an interview is completely recorded in an Examiners Amendment, no separate Interview Summary Record is required.

The Interview Summary Form shall be given an appropriate Paper No., placed in the right hand portion of the file, and listed on the "Contents" section of the file wrapper. In a personal interview, a duplicate of the Form is given to the applicant (or attorney or agent) at the conclusion of the interview. In the case of a telephone or video-conference interview, the copy is mailed to the applicant's correspondence address either with or prior to the next official communication. If additional correspondence from the examiner is not likely before an allowance or if other circumstances dictate, the Form should be mailed promptly after the interview rather than with the next official communication.

The Form provides for recordation of the following information:
- Application Number (Series Code and Serial Number)
- Name of applicant
- Name of examiner
- Date of interview
- Type of interview (telephonic, video-conference, or personal)
- Name of participant(s) (applicant, attorney or agent, examiner, other PTO personnel, etc.)
- An indication whether or not an exhibit was shown or a demonstration conducted
- An identification of the specific prior art discussed
- An indication whether an agreement was reached and if so, a description of the general nature of the agreement (may be by attachment of a copy of amendments or claims agreed as being allowable). Note: Agreement as to allowability is tentative and does not restrict further action by the examiner to the contrary.
- The signature of the examiner who conducted the interview (if Form is not an attachment to a signed Office action)

It is desirable that the examiner orally remind the applicant of his or her obligation to record the substance of the interview of each case. It should be noted, however, that the Interview Summary Form will not normally be considered a complete and proper recordation of the interview unless it includes, or is supplemented by the applicant or the examiner to include, all of the applicable items required below concerning the substance of the interview.

A complete and proper recordation of the substance of any interview should include at least the following applicable items:
1) A brief description of the nature of any exhibit shown or any demonstration conducted,
2) an identification of the claims discussed,
3) an identification of the specific prior art discussed,
4) an identification of the principal proposed amendments of a substantive nature discussed, unless these are already described on the Interview Summary Form completed by the Examiner,
5) a brief identification of the general thrust of the principal arguments presented to the examiner,
   (The identification of arguments need not be lengthy or elaborate. A verbatim or highly detailed description of the arguments is not required. The identification of the arguments is sufficient if the general nature or thrust of the principal arguments made to the examiner can be understood in the context of the application file. Of course, the applicant may desire to emphasize and fully describe those arguments which he or she feels were or might be persuasive to the examiner.)
6) a general indication of any other pertinent matters discussed, and
7) if appropriate, the general results or outcome of the interview unless already described in the Interview Summary Form completed by the examiner.

Examiners are expected to carefully review the applicant's record of the substance of an interview. If the record is not complete and accurate, the examiner will give the applicant an extendable one month time period to correct the record.

Examiner to Check for Accuracy

If the claims are allowable for other reasons of record, the examiner should send a letter setting forth the examiner's version of the statement attributed to him or her. If the record is complete and accurate, the examiner should place the indication, "Interview Record OK" on the paper recording the substance of the interview along with the date and the examiner's initials.

Continuation of Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: the examiner indicated that the pending claims were unpatentable over the applied references and suggested that the applicant amend the claims highlighting the structure of the device rather than the difference in functions of the device relative to the prior art. Each method step should be more clearly and distinctly set forth in order to possibly read over the prior art. Attached are proposed amendments offered during this conversation, and a copy of previous statements and proposed amendments made in an interview with Examiner Mike Mendoza on 03-23-2005. No formal indication of allowability was given. .

US Patent Application Serial No. 10/075088
Inventor Spruiell
Docket IMA-0014-OXYPAK
Agent: Edward L. Kelley Reg. No. 41,112
Examiner Michael G. Mendoza
Art Unit 3731
Fax 571-273-4698 — 6 pages Dawson 571.272.4694 - AM

RE: Follow-up to telephone interview of 3/23/05 in preparation for responding to the office action mailed on 11/24/04

Item 1 Examiner Mendoza agreed to consider withdrawing the rejection of claims 7, 8, 14-16, 28 31, and 32 as being anticipated by Zapol et al. 5485827 because the reference fails to teach a medication for use in response to symptoms of an attack of a vascular disease.

Item 2 Agent Kelley agreed to submit proposed amendments to the independent claims in view of the remaining rejections and the cited references and Examiner Mendoza agree to discuss proposed amendments with his supervisor to determine if the proposed amendments overcome the rejections.

Item 3, not discussed in the interview, in Office Action mailed on 11/24/04 in paragraphs 8, 11, 12, 13, 16, 17, 20, 23, 24 the Examiner relies on Zapol et al. to reject the claims but never specifies which Zapol et al. reference is being relied upon. In view of item 1 above it is requested that the Examiner please clarify that the Zapol et al. reference relied upon in the above listed paragraphs is US6063407.

The following amendments to independent claims 7, 17, 19, 22, 28 and 29 are submitted for review and include new limitations discussed in the telephone interview of 3/24/05. Support for the new limitation is found in the specification on page 12, line 20, page 13, line 19-20, and on page 16, lines 9, 13, 21-27. As further discussed in the telephone interview, Agent Kelley will consider canceling independent claims 13, 14 and 25.

7. (PROPOSED AMENDMENT) An emergency medical kit, comprising:

- a breathable oxygen delivery system configured for self-administration of oxygen by a user in the event of the onset of symptoms of one of a heart attack and a stroke for rapidly increasing oxygen saturation in the blood of the user as soon as symptoms occur; and,
- ~~a~~ at least one other medication ~~for use in response to symptoms of an attack of a vascular disease~~ prescribed to the user based upon a diagnosed condition, said at least one other medication being provided for one of preventing thrombosis, inducing arteriolar relaxation, assisting in establishing a cardiac rhythm and assisting in diminishing oxygen demand in the affected area.

9. (PROPOSED AMENDMENT) An emergency medical kit, comprising:

- a breathable oxygen delivery system configured for self-administration of oxygen by a user in the event of the onset of symptoms of a serious attack of one of a heart attack and a stroke for rapidly increasing oxygen saturation in the blood of the user as soon as symptoms occur; and,
- an anticoagulant prescribed to the user based upon a diagnosed condition ~~for use in response to symptoms of a particular serious illness~~ to be taken by the user as soon as the symptoms occur for reducing the risk of thrombus formation in the affected area.

17. (PROPOSED AMENDMENT) An emergency medical kit ~~for treatment of one of a heart attack and a stroke upon the onset of symptoms thereof~~ comprising:

- a breathable oxygen supply configured for self-administration of oxygen by a user in the event of the onset of symptoms of one of a heart attack and a stroke for rapidly increasing oxygen saturation in the blood of the user as soon as symptoms occur, the breathable oxygen supply having;

- an oxygen storage tank having at least a 50 cubic inch internal storage capacity, an oxygen storage operating pressure range of between 100 and 4000 PSI and an empty weight of less than 5.0 pounds;
- a regulator valve attached to the oxygen storage tank for receiving oxygen from the storage tank at an inlet pressure of between 100 - 4000 PSI and delivering oxygen at an outlet pressure range of less than 50 PSI;
- an oxygen delivery tube having an inlet end attached to the regulator valve for receiving oxygen at the pressure of less than 50 PSI and an outlet end; and,
- a user oxygen delivery device attached to said delivery tube outlet end for delivering a supply of breathable oxygen to a user;

- ~~a~~ at least one other medication prescribed to the user based upon a diagnosed condition, said at least one other medication being provided for one of assisting in preventing thrombosis; assisting in inducing arteriolar relaxation; assisting in establishing a cardiac rhythm and assisting in diminishing oxygen demand; and,

- a portable container for storing and transporting the breathable oxygen supply and the at least one other medication in a convenient manner and configured to be easily carried by the user.

19. (PROPOSED AMENDMENT) A method for medical treatment ~~treating a serious attack of a vascular disease immediately upon the onset of one or more symptoms of the attack~~ comprising the steps of:

- establishing a risk that a patient may suffer ~~an unexpected attack of the vascular disease~~ a serious attack of a vascular disease;
- predetermining a treatment for prolonging the patient's life and for reducing a risk of permanent tissue damage to the patient in the event that the serious attack occurs;
- providing the patient with a portable emergency medical kit for carrying out the treatment ~~upon the onset of the~~ as soon as symptoms of the serious attack occur

and before ~~the patient can be treated~~ treatment can be provided by a medical professional, said portable emergency medical kit including a supply of breathable oxygen, configured to be self-administered by the patient, for increasing the level of oxygen saturation in the blood as soon as symptoms of the serious attack occur, and a second medication selected for separately treating the serious attack of the vascular disease in accordance with the predetermined treatment and,

- teaching the patient how to recognize the symptoms of the serious attack and how to carry out the treatment upon the onset of the symptoms.

22. (PROPOSED AMENDMENT) A method for medical treatment ~~treating a serious attack of a vascular disease~~ comprising the steps of;

- providing a ~~person~~ patient susceptible to ~~the~~ a serious attack of a vascular disease with a breathable oxygen delivery system configured for self-administration by the patient, said breathable oxygen delivery system being provided to increase the level of oxygen saturation in the blood as soon as symptoms of the serious attack occur;
- providing the ~~person~~ patient susceptible to the serious attack with a second medication to be self-administered ~~for use in response to symptoms of the serious attack~~ as soon as the symptoms occur; and,
- wherein said second medication ~~is for one of assisting in~~ is taken by the user and has the affect of one of preventing thrombosis, ~~assisting in~~ inducing arterial relaxation, ~~assisting in~~ establishing a cardiac rhythm, and ~~assisting in~~ diminishing oxygen demand.

28. (PROPOSED AMENDMENT) An emergency medical kit, comprising:

- a breathable oxygen delivery system configured for self-administration of oxygen by a user in the event of the onset of symptoms of a serious attack of

one of a heart attack and a stroke for rapidly increasing oxygen saturation in the blood of the user as soon as symptoms occur; and,

- an antiarrythmic agent prescribed to the user based upon a diagnosed condition ~~for use in response to symptoms of a particular serious illness~~ to be taken by the user as soon as the symptoms occur for establishing a cardiac rhythm.

29. (PROPOSED AMENDMENT) An emergency medical kit, comprising:

- a breathable oxygen delivery system configured for self-administration of oxygen by a user in the event of the onset of symptoms of a serious attack of one of a heart attack and a stroke for rapidly increasing oxygen saturation in the blood of the user as soon as symptoms occur; and,
- a cardioprotective agent prescribed to the user based upon a diagnosed condition ~~for use in response to symptoms of a particular serious illness~~ to be taken by the user as soon as the symptoms occur for reducing myocardial oxygen demand.

iMa

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FACSIMILE TRANSMISSION
DATE: April 7, 2005

TO: Examiner Michael Mendoza	**FROM: Edward Kelley**
COMPANY: USPTO Art Unit 3731	**COMPANY:** iMa
FAX: 571-273-4698 **TEL:**	**Fax: 781-541-6747** **Tel: 781-541-6579**

NUMBER OF PAGES: 10 (including this page)

RE: Proposed claim amendments for U. S. Patent Application Serial No. 10/075088

Dear Examiner Medoza,

Please review the attached proposal to amend the claims in the above referenced patent application and provide me with your opinion about whether the amended claims proposed herein are in condition for allowance . This paper relates to the Action mailed on 11/24/04 and to telephone discussions with yourself and Examiner Dawson. I would appreciate your answer no latter than 4/12 so that I can file a complete amendment in due time.

Thank you for your support.

Edward L. Kelley
Reg. No. 12,114
Tel. 781-541-6579

US Patent Application Serial No. 10/075088
Inventor SPRUIELL
Docket IMA-0014-OXYPAK
Agent: Edward L. Kelley Reg. No. 41,112
Examiner Michael Mendoza
Art Unit 3731
FAX 571-273-4698

April 7, 2005

PROPOSED AMENDMENTS

This correspondence comprises a proposal to amend the above listed application by canceling the pending independent claims and adding three new independent claims listed below. The three new independent claims set forth structural and process limitations not taught or suggested by the prior art of record.

In a telephone conversation between Examiner Glen Dawson and Agent Edward Kelley, on March 31, 2005, Examiner Dawson clarified that the pending claims were unpatentable because they did not set forth the invention as a unique combination of structural elements or method steps and suggested redrafting the apparatus claims to more clearly and distinctly set out the structure of the claimed elements instead of describing the structural elements in terms of function. The proposed new apparatus claims 1 &2 below were redrafted accordingly. Examiner Dawson further suggested redrafting the method claims to more clearly and distinctly set out each step of the method being claimed. The proposed new method claim was redrafted accordingly.

If the Examiner is agreeable that proposed new claims submitted herein would be patentable over the prior art of record, a complete amendment addressing each claim and each rejection will be submitted prior to April 24, 2005 along with a request for a two month extension of time.

1. (Proposed new apparatus claim) An emergency medical kit for increasing a patient's chance to survive a sudden ischemic event without suffering permanent tissue damage comprising:

a portable oxygen tank (20) containing oxygen stored at a high pressure;

a pressure regulating valve (25) attached to the oxygen tank (20) for regulating the pressure of oxygen as it exits the oxygen tank;

a hollow delivery tube (30) and a face mask (35) for receiving oxygen from the pressure regulating valve (25) and delivering the oxygen to the face mask at a pressure and flow rate consistent with normal breathing;

wherein the oxygen tank, regulator valve delivery tube and face mask are configured as a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event; and,

a medication in a form and dosage suitable for oral self-administration during the sudden ischemic event, and comprising a nitrate that provides dilation of blood vessels.

(Argument) Zapol et al (6063407) teach a method of inhibiting or preventing a vascular thrombosis (the formation of a blood clot) and of inhibiting or preventing arterial restenosis (abnormal narrowing of the arterial lumen as a result of excessive (neo)intimal hyperplasia in a mammal by causing the mammal to inhale a therapeutically effective amount of gaseous NO. Zapol et al. further teach administering a second compound that could potentiate the beneficial effects of inhaled NO. (See Col. 1 line 60 -col. 2 line 15) Zapol et al. further teach that the NO gas may be administered as a mixture including NO, oxygen (O_2) and nitrogen (N_2) or other inert gas, including air, but that the concentration of NO_2 needs to be monitored and kept within safe limits. (see Col. 3 lines 25-40) Zapol et al. also teach that in an emergency field situation administration of NO gas could be accomplished by attaching a tank of compressed NO gas in N_2 and a second tank of oxygen or oxygen/N_2 mixture to an inhaler designed to mix gas from two sources by controlling the flow of gas from each source. (Col. 6, lines 44-50).

Proposed claim 1 is fundamentally different from Zapol et al. because it is limited to a medication in a form and dosage suitable for oral self-administration. In this instance, Applicant uses the word oral to mean entering the blood via the digestive track and not by inhalation into the lungs. No such structure is taught or suggested by Zapol because Zapol et al. is specifically limited to a treatment that requires inhaling gaseous NO into the lungs. Moreover, claim 1 includes the structural element of a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event and the structure described by Applicant is completely different from the device described by Zopal et al for emergency administration of NO in the field.

2 (Proposed new apparatus claim) An emergency medical kit for increasing a patient's chance to survive a sudden ischemic event without suffering permanent tissue damage comprising:

a portable oxygen tank (20) containing oxygen stored at a high pressure;

a pressure regulating valve (25) attached to the oxygen tank (20) for regulating the pressure of oxygen as it exits the oxygen tank;

a hollow delivery tube (30) and a face mask (35) for receiving oxygen from the pressure regulating valve (25) and delivering the oxygen to the face mask at a pressure and flow rate consistent with normal breathing;

wherein the oxygen tank, regulator valve delivery tube and face mask are configured as a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event; and,

a medication in a form and dosage suitable for self-administration during the sudden ischemic event, and wherein the medication comprises any one of:

an agent that inhibits platelet aggregation selected from the group of acetylsalicyclic acid, aspirin-dipyridamole, clopidogrel, heparins and glycoprotein IIb/IIIa inhibitors;

a cardio protective agent selected from the group of beta-adreneric antagonists (Beta-Blocker), calcium channel blocking drugs and angiotensin-converting enzyme (ACE) inhibitors; and,

an antiarrythmic agent comprising magnesium.

(Argument) Proposed claim 2 is fundamentally different from any of the prior art of record because it includes a combination of structural elements not taught or suggested by the prior art. In particular, none of the prior art of record teaches or suggests a medical kit with a combination of structural elements comprising a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event with a medication in a form and dosage suitable for self-administration during the sudden ischemic event and wherein the medication comprises any one of the agents set forth.

3. (Proposed new method claim) A method for increasing a patient's chance to survive a sudden ischemic event without suffering permanent tissue damage comprising the steps of:

- diagnosing a specific medical condition that may cause the patient to be at a higher than normal risk of suffering the sudden ischemic event;
- prescribing a medication in a dosage and form suitable for self-administration, said medication comprising an agent that if taken in combination with breathable oxygen as soon as the patient recognizes symptoms of the sudden ischemic event decreases the possibility of infarction caused by an obstruction of blood circulation;
- prescribing a portable supply of breathable oxygen configured to deliver breathable oxygen to the patient at a pressure and flow rate consistent with normal breathing and for self-administration of the breathable oxygen during the sudden ischemic event;

- instructing the patient how to recognize symptoms of the sudden ischemic event;
- instructing the patient how to self-administer the medication and the breathable oxygen as soon as symptoms of a sudden ischemic event occur; and,
- instructing the patient to keep the medications and the portable supply of breathable oxygen in an accessible location at all times.

(Argument) Proposed claim 3 is fundamentally different from any of the prior art of record because it includes a combination of steps not taught or suggested by the prior art. In particular, none of the prior art of record teach or suggest prescribing a medication to a patient that if taken and taking in combination with breathable oxygen as soon as the patient recognizes symptoms of the sudden ischemic event decreases the possibility of infarction caused by an obstruction of blood circulation as set forth in proposed claim 3. Moreover none of the prior art of record teach or suggest the step of instructing the patient how to self-administer the medication and the breathable oxygen as soon as symptoms of a sudden ischemic event occur or the step of instructing the patient to keep the medications and the portable supply of breathable oxygen in an accessible location at all times as set out in proposed new claim 3.

General comments regarding the prior art of record as related to the proposed new claims.

Zopal et al. (6063407) is specifically limited to a treatment that requires inhaling gaseous NO into the lungs. Zopal et al. never teach or suggest a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event or a nitrate that provides dilation of blood vessels in a form and dosage suitable for oral self-administration during the sudden ischemic event as set forth in proposed new claim 1 or any of the medications set forth as set forth in proposed new claim 2 above. Similarly, Zopal et al. never teach or suggest the combination of steps set out in proposed new claim 3 above.

Zopal et al. (5485827) is specifically limited to a method for prevention and treatment of asthma attacks or other forms of bronchoconstriction of acute respiratory failure or of reversible pulmonary vasoconstriction by identifying an affected mammal and causing the mammal to inhale therapeutically effective amounts of gaseous nitric oxide (NO) or NO releasing compound. Zopal et al. provides no teaching or suggestion to treat a sudden ischemic event, prevent thrombosis, provide a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event or provide a medication in a form and dosage suitable for oral or other form of self-administration during the sudden ischemic event as set forth in the proposed new claims 1 & 2 above. Similarly, Zopal et al. never teach or suggest the combination of steps set out in proposed new claim 3 above.

Mohan (4699288) is limited to a pressure vessel with a particular construction and never teaches or suggests any medication or a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event as set

forth in the proposed new claims 1 & 2 above. Similarly, Mohan. never teaches or suggests the combination of steps set out in proposed new claim 3 above.

Anderson (4197842) teaches a portable pulmonary respirator that includes a high-pressure tank containing oxygen, a pressure regulating valve, a hose and facemask and that provides a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event. However, Anderson fails to teach any of the medications set forth in the proposed new claims 1 & 2 above. Similarly, Anderson never teaches or suggests the combination of steps set out in proposed new claim 3 above.

Lowell (6292687) teaches a heart dysfunction reader worn by the patient to sense an emergency condition and to give off an audio alarm and a wireless signal in response thereto. However, Lowell fails to teach or suggest the elements or method steps set forth in the proposed new claims 1-3 above.

Kirchgeorg et al. (6327497) teach a portable oxygen cylinder, regulator valve, gage, mask and hose housed in an emergency medical kit and usable by the patient to self-administer oxygen during the sudden ischemic event. However, Kirchgeorg et al. fail to teach or suggest any of the medications set forth in the proposed new claims 1 & 2 above or the combination of method steps of diagnosing a patient, prescribing a medication and prescribing breathable oxygen to the patient as set forth in the proposed new claims 1-3 above.

Duhaylongsod (6141589) teaches a method, compositions and apparatus for inducing reversible ventricular asystole in a beating heart, (suppressing autonomous heartbeat) during surgery, while maintaining the ability for the heart to be paced electrically. However Duhaylongsod fails to teach or suggest an emergency medical kit that includes

a portable breathable oxygen delivery system (15) usable by the patient to self-administer oxygen during the sudden ischemic event and a medication in a form and dosage suitable for self-administration during the sudden ischemic event or the method steps of instructing the patient how to recognize symptoms of the sudden ischemic event and instructing the patient how to self-administer the medication, all as set forth in the proposed new claims 1-3 above.